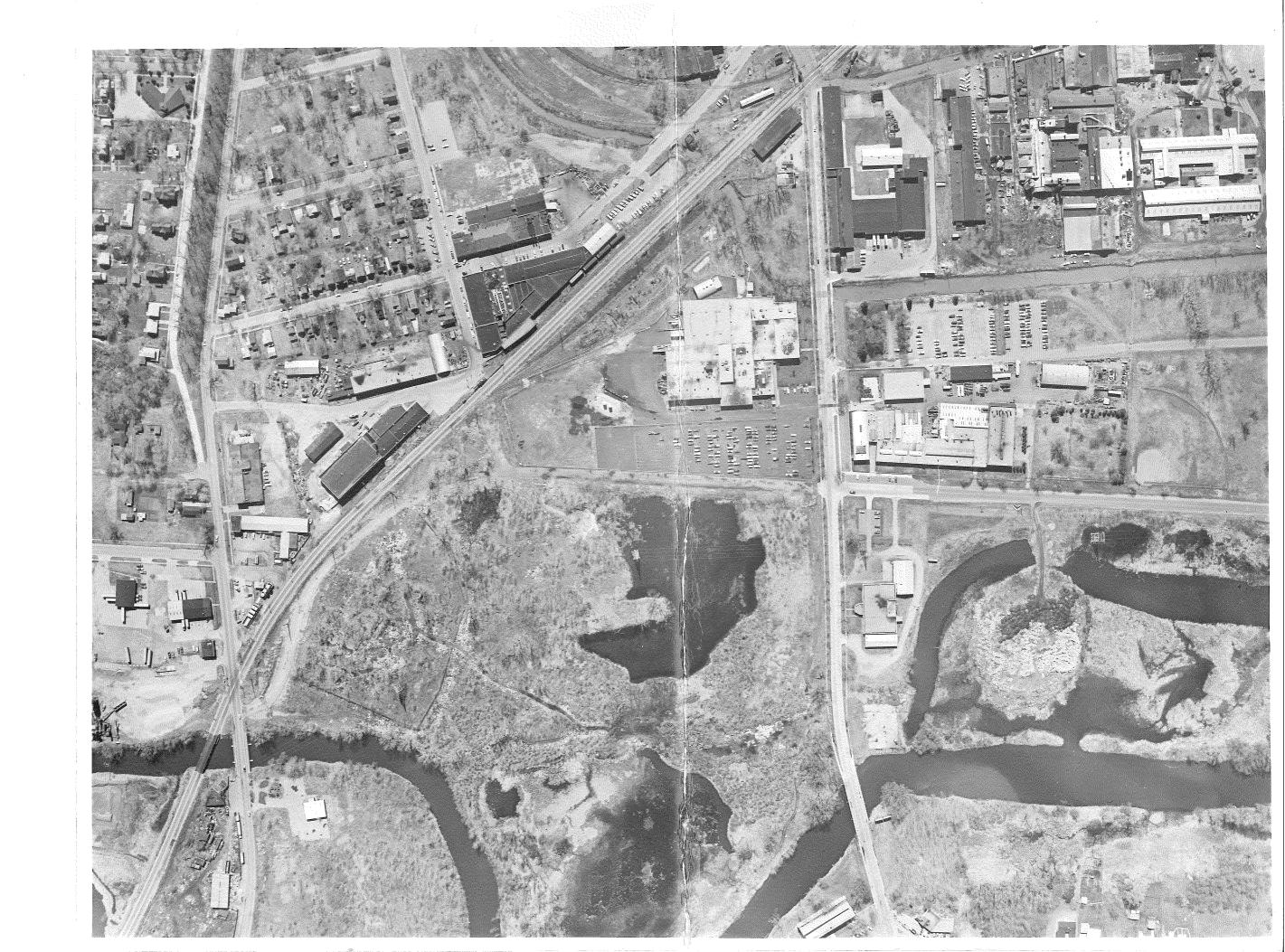


MAP OF PART OF SEC. 24, T45, R 19W, CITY OF BENTON HARBOR, MICHIGAN DRAWN BY RB

SCALE |" = 500"

WIGHTMAN & ASSOCIATES, INC. 920 BROAD STREET ST. JOSEPH, MICH 4908

X-1262 FOR MODERN PLASTICS





(fil), in areas are spaced for elite type, i.e., 12 characters finch			Form Approved UMB No. 158-F	קלוט
	ERAL INFORM		I. EPA I.D. NUMBER	
CA CO	nsolidated Permits Pi	rogram	FM. T. D.O.O. 5.0.6.9	844
GENERAL (Read the "(	General Instructions"	before starting.)	GENERAL INSTRUCT	227 11 61
I. EPA I.D. NUMBER			If a preprinted label has been	provided, affix
			it in the designated space. Reviation carefully; if any of it is	incorrect, cross
III. FACILITY NAME			through it and enter the corresponding the corresponding to the correspo	oct data in the
. FACILITY	I/I/I		the preprinted data is absent (	the area to the
	CE LABEL IN	THIS SPACE	left of the label space lists to that should appear), please pr	ovide it in the
		$V \setminus V \setminus V \setminus V$	proper fill—in area/s/ below. complete and correct, you nee	
	I/I/I		Items 1, III, V, and VI (excernust be completed regardless,	
VI. FACILITY			items if no label has been pro	vided. Refer to
K LOCATON / / / / / / / / / / / / / / / / / / /	NNN		the instructions for detailed tions and for the legal authorisms.	
			which this data is collected.	
II. POLLUTANT CHARACTERISTICS				
INSTRUCTIONS: Complete A through J to determine w				
questions, you must submit this form and the supplement if the supplemental form is attached. If you answer "no"	tal form listed in the	e parenthesis following the ques	tion. Mark "X" in the box in the	third column
is excluded from permit requirements; see Section C of the	instructions. See als	o, Section D of the instructions	for definitions of bold-faced ter	ms.
SPECIFIC QUESTIONS	MARK'X'			MARK 'X'
	YES NO ATTACHED	B. Does or will this facility		NO ATTACHED
A is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.?	$\mathbf{x}$	include a concentrated a	nimal feeding operation or	<b>V</b>
(FORM 2A)		squatic animal production discharge to waters of the	n facility which results in a U.S.? (FORM 2B)	X
C. Is this a facility which currently results in discharges	35 17 18 X	D. Is this a proposed facility	(other than those described	20 21
to waters of the U.S. other than those described in A or B above? (FORM 2C)	12 72 24	waters of the U.S.? (FOR)	will result in a discharge to	X 5 26 27
E. Does or will this facility treat, store, or dispose of		F. Do you or will you inject	at this facility industrial or the lowermost stratum con-	
hazerdous wastes? (FORM 3)	X	taining, within one qua	rter mile of the well bore,	x
G. Do you or will you inject at this facility any produced	23 29 30	underground sources of d	A STATE OF THE STA	1 32 33
water or other fluids which are brought to the surface	.1 1	H. Do you or will you inject	at this facility fluids for spe- ning of sulfur by the Frasch	
in connection with conventional oil or natural gas pro- duction, inject fluids used for enhanced recovery of	1 1 1	process, solution mining	of minerals, in situ combus- overy of geothermal energy?	
oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)	X 31 31	(FORM 4)		X 31 31 31
1. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the in-		J. Is this facility a propose		
structions and which will potentially emit 100 tons	1	instructions and which w	ill potentially emit 250 tons	
per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an	X	Air Act and may affect o	r be located in an attainment	X
attainment area? (FORM 5)  III. NAME OF FACILITY	42	area? (FORM 5)		3 44 45
C. C				
1 SKIP MO.D.E.R.N. P.L.A.S.T.I.C.S	C.O.R.P. 0	RATION.		
IV. FACILITY CONTACT				
A. NAME & TITLE (lost, fi	rst, & title)	8.	FHONE (area code & no.)	
RICHARD E. MOORE P	LANT E	NGINEE R6 1	6 9 26 8 201	
11 2		45 46	41 49 - 51 52 - 55	
V. FACILITY MAILING ADDRESS	BOX			
	11111	<del></del>		
3P, O, B,O, X, 1, 3, 6, 7,		4		
B. CITY OR TOWN		C.STATE D. ZIP COL	DE CONTRACTOR	
4 BENT ON HARBOR	1 1 1 1 7 1	MI 4902	2	
15 16		40 41 42 47		
VI. FACILITY LOCATION	EPECIFIC IDENTIF	IED.		
E TOUR STREET, ROUTE RO. OR STREET	TITLE TO THE TENT			
54 8.9 NORTH SHORE D	<u>, R I V E , , </u>			
B. COUNTY NAME				
BERRIEN	1 1 1 1 1 1			
46		70	F   F. COUNTY CODE	
COMPANY OF TOWN AND THE PROPERTY OF THE P	1	D.STATE E. ZIP COC	(if known)	
6 B E N T O N H A R B O R		MI 4.9.0 2	2 021	
EPA Form 3510-1 (6-80)		40 1 41 42 47	E CONTINI	JE ON REVE
		MAY 0 4 10R	l Communication	and the state of the

II. SIC CODES (4-digit, in order of priority)				题第一个时间。 第	
A. FIRST	, a lagranting time the	C	B. SEC	OND	
3,0,7,9 (specify) Custom plastic mo	olding	7	(specify)	-	
C. THIRD		15 16 - 19	D. FOL	JRTH 2	evi.
(specify)		7	(specify)		
16 - 19	in est de la company de la	15 16 - 19			
III. OPERATOR INFORMATION	A. NAME			B. Is th	e name listed in
4			11111	Item	VIII-A also the
MODERN PLASTIC	S CORPORA	T, I, O, N			ES - NO
· Committee and the committee of the com		- h if 10-t 17	া বিক্রাত কর্ম্যুক্ত আছে। সাইটো টি অন্তর্ভাৱন কর্মান করে।		
F=FEDERAL M=PUBLIC (other than	federal or state) (si	pecify)	specify.)	D. PHONE (area code	& no.)
S=STATE O = OTHER (specify) P=PRIVATE	P   "	Owner ope	erated A	5 1 6 9 2 6	8201
	R P.O. BOX				
O. B.O.X., 1.3.6.7.					
		GSTATE	H. ZIP CODE IX. INC	DIAN LAND	
F. CITY OR TOW				acility located on India	allands?
BENTON, HARBOR,		M,I	/ 0 0 0 d =	J YES 🗆 🖾 NO	きぎょく ひがたわら ひゅ
		40 40 342			
C EXISTING ENVIRONMENTAL PERMITS	D pop (Air Emissions	from Proposed Sc	versee!		
A. NPDES (Discharges to Surface Water)	D, PSD (Air Emissions	T T T T T	T T		
N M, I, 0, 0, 0, 5, 6, 8, 1	9 P		30		
B. UIC (Underground Injection of Fluids)	E. OTHE	R (specify)			Ing - EN ALK
	9 2 3 3 2 7	HMCPC	B (specify)		
5 16 17 16	0 15 16 37 18 E OTHE	R (specify)	Pollut	ion indident	prevention
EFE TITTE	<u> </u>	1 1 1 1 1	(specify)	The property of the second	
3 14 17 13	0 16 16 17 18		30		
KI. MAP					
Attach to this application a topographic ma the outline of the facility, the location of e	p of the area extending to	o at least one mi roposed intake :	le beyond property b	ounderies. The map r	nust show
treatment, storage, or disposal facilities, an	d each well where it inje	cts fluids under	ground. Include all sp	orings, rivers and oth	er surface
water bodies in the map area. See instruction	gradient in the Branch of the Application of the second	s. <u>A</u>			
XII. NATURE OF BUSINESS (provide a brief descr	iption)				
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Custom molding of the	ermoset and the	ermoplast	ics.		
		• .		•	
			:		· · ·
	•		•		
				•	
XIII. CERTIFICATION (see instructions)					
I certify under penalty of law that I have p	ersonally examined and a	ım familiar with	the information subn	nitted in this applica	tion and all
attachments and that, based on my inquit	y of those persons imm	nediately respons	sible for obtaining th	e information conta	ined in the
application, I believe that the information false information, including the possibility of	is true, accurate and con of fine and imprisonment.	ipiete. I am awa	are urat there are sign	micant penalties for	submitting
A. NAME & OFFICIAL TITLE (type or print)	B. SIGNAT	25 4 4		C. DATE SI	GNED
Richard E. Moore			and	(1-	361
Plant Engineer			1/1/17	2 17 21	1-61
COMMENTS FOR OFFICIAL USE ONLY					
	IGNATURE	<u> </u>	agenta and the second seco		for the second
A Form 3510-1 (6-80) REVERSE		(4) (4) (4) (4) (4) (4) (4) (4) (4) (4)	wing and the second	55]	

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3 SEPA		Consolidated F				~ <u> </u>	FMID	0056	69	84	/ T/+
RCRA	(This infonuat	ion is required	under Sect	ion 3005	of RCI	₹ <i>A.)</i>	I MITIA	חכוחונ	1619	0 H I	4   13   14
FOR OFFICIAL USE ONLY				r de la	7						15.5
APPLICATION DATE RECEIVED APPROVED (yr., mo., & day)					CO	MENTS			· .		
						.4	1	p			
23 24 29			aforasa sanaka		Zero stanisti	The same was the first with a fact that it				of a large of the	
II. FIRST OR REVISED APPL	ICATION										
Place an "X" in the appropriate box	in A or B below (m	ark one box or	nly) to indi	cate whe	ther thi	s is the first app	olication you a	re submittir	ng for yo	our faci	lity or a
revised application. If this is your fi EPA I.D. Number in Item I above.	rst application and	you aiready kn	ow your ta	CIIITY'S E	PA 1.D.	Number, or it	this is a revised	application	ı, enter	your ta	Cility's
A. FIRST APPLICATION (place	an "X" below and	provide the ap	propriate d	iate)			Maria La				
1. EXISTING FACILITY (	See instructions for Complete item belo	definition of "	'existing'' fo	acility.		[	2.NEW FAC				
	EXISTING FACIL	* (	DE THE D	ATE (VI	. mo 8	edav) t	YR.   MO.	P	ROVID	ETHE	
E FIGURE OFF	RATION BEGAN C the boxes to the lef	OR THE DATE						] [ \	TON BE	GAN	
15 73 74 75 76 77 78			T4 T	1		i	73 74 75 76	77 78	XPECT	ED TO	BEGIN
B. REVISED APPLICATION ()  1. FACILITY HAS INTER		ana complete	item i abot	,e)			2. FACILIT	Y HAS A R	CRA PI	ERMIT	
72	*	· CITY C				and the second	72			and the same	Translation 20
III. PROCESSES – CODES AN	D DESIGN CAP	ACTTIES	2 1 10 10							2052	
A, PROCESS CODE - Enter the co	de from the list of	process codes b	elow that I	est desc	ribes ea	ch process to be	used at the fa	cility. Ten	lines ar	provid	ded for
entering codes. If more lines are describe the process (including it	needed, enter the o	code <i>(s)</i> in the sp n the space pro	pace provid	led. It a ne form <i>l</i>	process Item III	will be used that I-Cl.	at is not includ	ed in the lis	st of coo	des belo	w, then
		And the second		1.0			the great great				
B. PROCESS DESIGN CAPACITY  1. AMOUNT — Enter the amou		ntered in colum	n A enter t	he capac	ity of ti	ne process.					
2. UNIT OF MEASURE - For	each amount entere	ed in column B	(1), enter ti	ne code 1	rom the	list of unit me	asure codes bel	ow that de	scribes t	he unit	of
measure used. Only the unit				sed.							
		RIATE UNITS					PRO- CESS	APPROI MEASU			
PROCESS		GN CAPACITY			PR	OCESS	CODE		IGN CA		
Storage:	ì	4000		Treatm	ent:		•			•	**
CONTAINER (barrel, drum, etc.) TANK		OR LITERS		TANK			··· TO1	GALLON LITERS I			R
WASTE PILE	S03 CUBIC YA			SURFA	CEIMI	POUNDMENT	T02		SPER	O YAC	R
SURFACE IMPOUNDMENT	S04 GALLONS	S OR LITERS		INCIN	ERATO	R	тоз	TONS PE			UR:
Disposal:	D79 GALLONS	S OR LITERS				A		GALLON LITERS			OR
LANDFILL	D80 ACRE-FE	ET (the volume		OTHE	(Use f	or physical, che logical treatmen	mical, TO4	GALLON			R.
	depth of o	er one acre to o ne foot) OR	•	process	es not c	occurring in tan	ks.	LITERS	PER DA	Υ	
LAND APPLICATION	D81 ACRES O	R HECTARES		ators.	ımpour Describe	idments or inci	ner-		,		
			_	44		the processes	ın	*	,		
OCEAN DISPOSAL	D82 GALLONS	S PER DAY OF ER DAY	R :	the spa	ce provi	ided; Item III-0	5.7)				
	D82 GALLONS LITERS P D83 GALLONS	S PER DAY OF	R :: 	the spa	ce provi	ded; Item III-(	2)				
OCEAN DISPOSAL	D82 GALLONS LITERS P D83 GALLONS UNIT OF	S PER DAY OF ER DAY		the spa	ce provi Ul	ided; Item III-0 NIT OF	5.				INIT OF
OCEAN DISPOSAL	D82 GALLONS LITERS P D83 GALLONS	S PER DAY OF ER DAY		the spa	ce provi UI ME	ded; Item III-(	UNIT OF M	EASURE		M	
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C. SPACE FOR				
INCLUDE D	ADDITIONAL PROCESS CODES, OF ESIGN CAPACITY.	RF 9 DESCRIBING OTHER PROCESSES	S (code "TU4" FOR EACH PROCESS ENTERED HERE	ĺ
				İ
(1)	30 cu. yd. compacto	r container		
(1) 2	46 cu. yd. open top	container		
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	TION OF HAZARDOUS WASTE			
handle haza	rdous wastes which are not listed in 4	10 CFR, Subpart D, enter the four—digit no	part D for each listed hazardous waste you will handle. If younder(s) from 40 CFR, Subpart C that describes the character	is-
,	the toxic contaminants of those hazard			
basis. For e			te the quantity of that waste that will be handled on an annu- nnual quantity of all the non—listed waste(s) that will be handled	
C. UNIT OF N	MEASURE - For each quantity entere	ed in column B enter the unit of measure	code. Units of measure which must be used and the appropria	te
	ENGLISH UNIT OF MEASURE		C UNIT OF MEASURE CODE	
	TONS.		C TONSM	
	ecords use any other unit of measure appropriate density or specific gravity		e converted into one of the required units of measure taking in	to
D. PROCESSE		of the waste.		
1. PROCES	SS CODES:	azardous waste entered in column A selec	ct the code(s) from the list of process codes contained in Item	111
to indica For non contains that cha	ate how the waste will be stored, treate —listed hazardous wastes: For each of in Item III to indicate all the progracteristic or toxic contaminant.	d, and/or disposed of at the facility. characteristic or toxic contaminant entered tesses that will be used to store, treat, and	d in column A, select the code(s) from the list of process codd/or dispose of all the non—listed hazardous wastes that posse	les ess
		g process codes. If more are needed: (1) I ter in the space provided on page 4, the lin	Enter the first three as described above; (2) Enter "000" in t e number and the additional code(s).	ne
2. PROCE	SS DESCRIPTION: If a code is not lis	ted for a process that will be used, describe	the process in the space provided on the form.	
			VASTE NUMBER — Hazardous wastes that can be described	by
1. Select o	EPA mazaroous vyaste Number shall be	e described on the form as follows:		
	ne of the EPA Hazardous Waste Numb			lel
2. In colur	ne of the EPA Hazardous Waste Numb of the waste and describing all the pro nn A of the next line enter the other	ocesses to be used to treat, store, and/or dis EPA Hazardous Waste Number that can be		
2. In colur	ne of the EPA Hazardous Waste Numb of the waste and describing all the pronn A of the next line enter the other and with above" and make no other enter	ocesses to be used to treat, store, and/or dis EPA Hazardous Waste Number that can be	spose of the waste. be used to describe the waste, In column D(2) on that line en	
2. In colur "include 3. Repeat EXAMPLE FO per year of ch are corrosive o	ne of the EPA Hazardous Waste Number of the waste and describing all the pronn A of the next line enter the other and with above" and make no other entracted 2 for each other EPA Hazardous V PR COMPLETING ITEM IV (shown in the shavings from leather tanning and and there will be an estimated 20	ocesses to be used to treat, store, and/or dis EPA Hazardous Waste Number that can be ries on that line. Vaste Number that can be used to describe a line numbers X-1, X-2, X-3, and X-4 belowed that finishing operation. In addition, the facility to pounds per year of each waste. The other	spose of the waste, be used to describe the waste. In column D(2) on that line en the hazardous waste.  w/ — A facility will treat and dispose of an estimated 900 pour lity will treat and dispose of three non—listed wastes. Two was ner waste is corrosive and ignitable and there will be an estimate	ter ids tes
2. In colur "include 3. Repeat EXAMPLE FO per year of chare corrosive of 100 pounds per A. EF	ne of the EPA Hazardous Waste Number of the waste and describing all the pronn A of the next line enter the other ed with above" and make no other entered by the step 2 for each other EPA Hazardous VER COMPLETING ITEM IV (shown in the sharings from leather tanning and there will be an estimated 20 ryear of that waste. Treatment will be	pocesses to be used to treat, store, and/or dis EPA Hazardous Waste Number that can be ries on that line. Waste Number that can be used to describe a line numbers X-1, X-2, X-3, and X-4 belowed finishing operation. In addition, the facility pounds per year of each waste. The other in an incinerator and disposal will be in a locunt	spose of the waste, be used to describe the waste. In column D(2) on that line en the hazardous waste.  w/ — A facility will treat and dispose of an estimated 900 pour lity will treat and dispose of three non—listed wastes. Two was ner waste is corrosive and ignitable and there will be an estimate	ter ids tes
2. In colur "include 3. Repeat EXAMPLE FO per year of chare corrosive of 100 pounds pe	ne of the EPA Hazardous Waste Number of the waste and describing all the pronn A of the next line enter the other ed with above" and make no other enterstep 2 for each other EPA Hazardous V or COMPLETING ITEM IV (shown in the shavings from leather tanning and there will be an estimated 20 rayear of that waste. Treatment will be A RD. B. ESTIMATED ANNUAL NO QUANTITY OF WASTE	cocesses to be used to treat, store, and/or dis EPA Hazardous Waste Number that can be vies on that line. Vaste Number that can be used to describe a line numbers X-1, X-2, X-3, and X-4 below a finishing operation. In addition, the facil to pounds per year of each waste. The oth- in an incinerator and disposal will be in a line	spose of the waste, be used to describe the waste. In column D(2) on that line en the hazardous waste.  w/ — A facility will treat and dispose of an estimated 900 pour lity will treat and dispose of three non—listed wastes. Two was ner waste is corrosive and ignitable and there will be an estimate landfill.	ter ids tes
2. In colur "include 3. Repeat EXAMPLE FO per year of chare corrosive of 100 pounds per A. EF HAZA ZO WASTE	ne of the EPA Hazardous Waste Number of the waste and describing all the pronn A of the next line enter the other ed with above" and make no other enterstep 2 for each other EPA Hazardous V or COMPLETING ITEM IV (shown in the shavings from leather tanning and there will be an estimated 20 rayear of that waste. Treatment will be A RD. B. ESTIMATED ANNUAL NO QUANTITY OF WASTE	coesses to be used to treat, store, and/or dis EPA Hazardous Waste Number that can being on that line.  Vaste Number that can be used to describe a line numbers X-1, X-2, X-3, and X-4 befored finishing operation. In addition, the facility opounds per year of each waste. The other in an incinerator and disposal will be in a local property of the company of the comp	spose of the waste, be used to describe the waste. In column D(2) on that line en the hazardous waste.  w/ — A facility will treat and dispose of an estimated 900 pour lity will treat and dispose of three non—listed wastes. Two was ner waste is corrosive and ignitable and there will be an estimate landfill.  D. PROCESSES  2. PROCESS DESCRIPTION	ter ids tes
2. In colur "include 3. Repeat EXAMPLE FO per year of chare corrosive of 100 pounds per HAZA E O WASTE IZ (enter columns)	ne of the EPA Hazardous Waste Number of the waste and describing all the pronn A of the next line enter the other ed with above" and make no other enter step 2 for each other EPA Hazardous Ver COMPLETING ITEM IV (shown in rome shavings from leather tanning armly and there will be an estimated 20 repear of that waste. Treatment will be A B. ESTIMATED ANNUAL Odd)	cocesses to be used to treat, store, and/or dis EPA Hazardous Waste Number that can be ries on that line.  Waste Number that can be used to describe to line numbers X-1, X-2, X-3, and X-4 belowed finishing operation. In addition, the facil to pounds per year of each waste. The other in an incinerator and disposal will be in a loc. UNIT OF MEA-SURE (enter code)  1. PROCESS CODES (enter)	spose of the waste, be used to describe the waste. In column D(2) on that line en the hazardous waste.  w/ — A facility will treat and dispose of an estimated 900 pour lity will treat and dispose of three non—listed wastes. Two was ner waste is corrosive and ignitable and there will be an estimate landfill.  D. PROCESSES  2. PROCESS DESCRIPTION	ter ids tes

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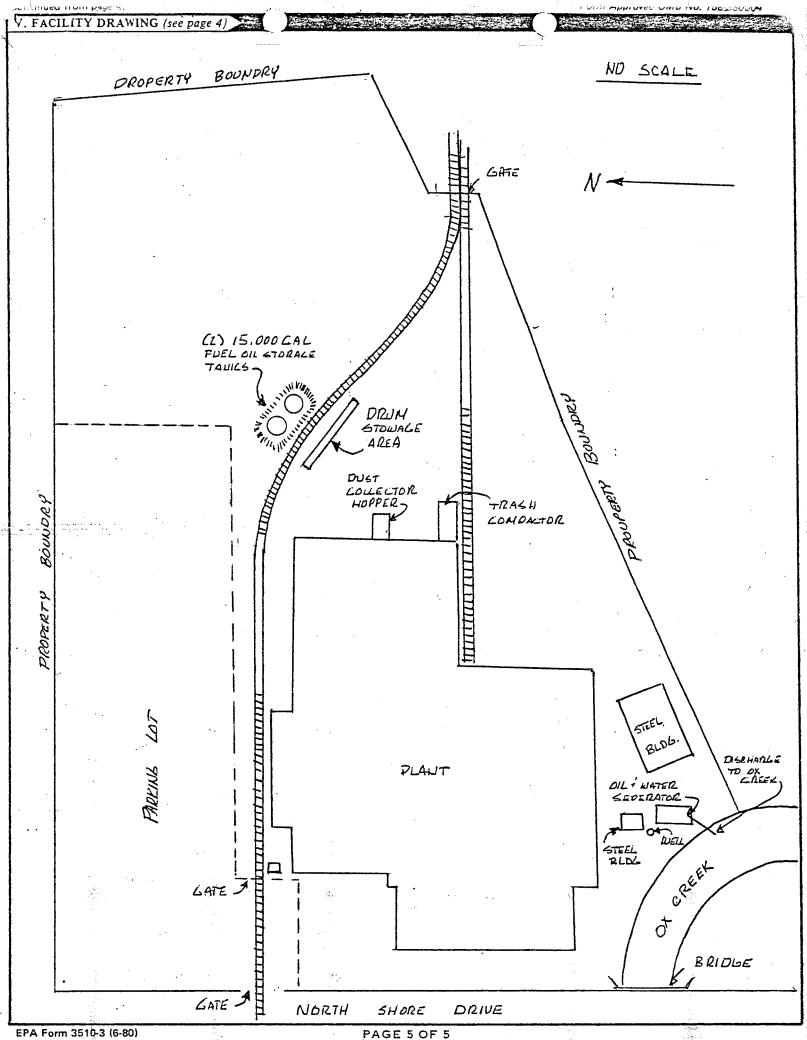
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IV. I				$\overline{}$	N OF HAZARDOUS WAST		COT UN		ued)						D. PRC	S ESSE		
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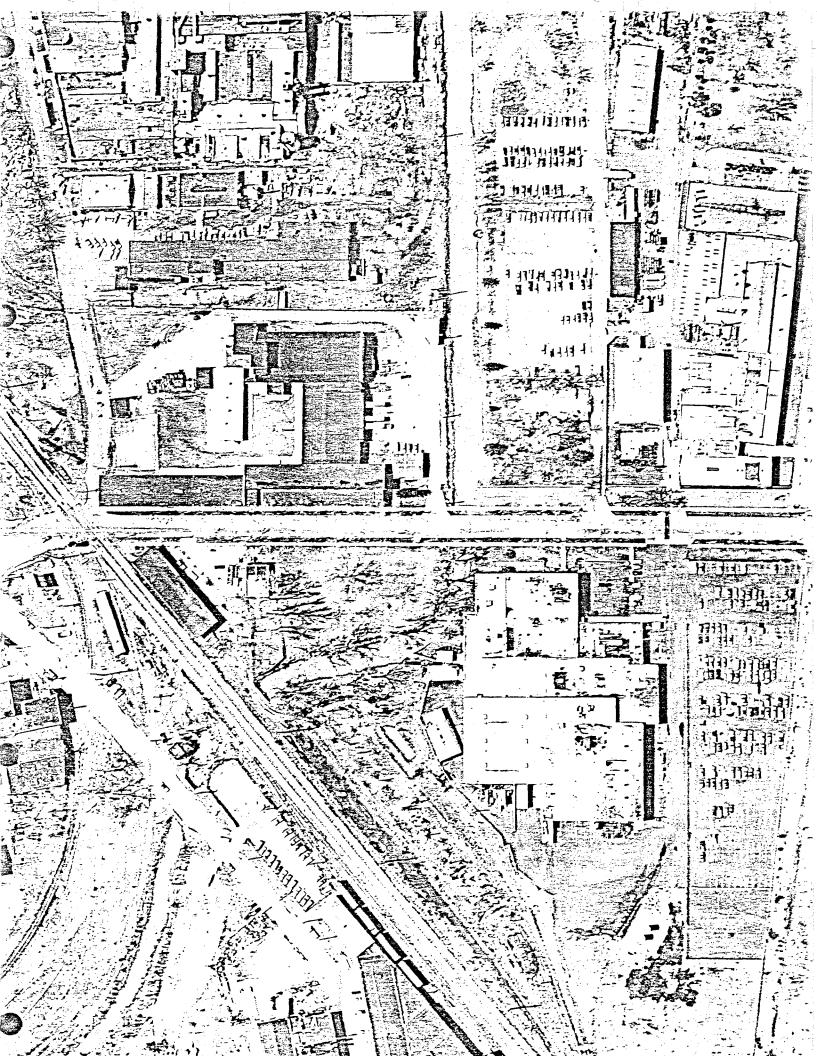
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	ntinued)	NAME OF THE PARTY	1.00 da
E. USE THIS SPACE TO LIST ADDITIONAL X	CESS CODES FROM ITEM D(1) C	ON PAGE	
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EPA 1.D. NO. (enter from page 1)			
FMID 00506984466			
V. FACILITY DRAWING			
All existing facilities must include in the space provided on	page 5 a scale drawing of the facility <i>(se</i>	ee instructions for more detail).	•
VI. PHOTOGRAPHS			
All existing facilities must include photographs (aeri treatment and disposal areas; and sites of future stor	<i>al or ground—level)</i> that clearly de rage, treatment or disposal areas <i>(se</i>	llineate all existing structures; exist ee instructions for more detail).	tingistorage,
VII. FACILITY GEOGRAPHIC LOCATION			
LATITUDE (degrees, minutes, & seconds	)	LONGITUDE (degrees, minutes, & sec	conds)
42076		8627665	
VIII. FACILITY OWNER		72 - 74 75 76 77 - 79	
A. If the facility owner is also the facility operator as I	isted in Section VIII on Form 1 "Gene	eral Information" place an "X" in the i	nox to the left and
skip to Section IX below.	integration viti and and it, con-		
B. If the facility owner is not the facility operator as I	isted in Section VIII on Form 1, comple	ete the following items:	
1. NAME OF FACIL	LITY'S LEGAL OWNER	2. PHONE	NO. (area code & no.)
<u>a</u>			
E Modern Plastics Corpostion		55 56 - 58	9 2 6 8 2 0 1
3. STREET OR P.O. BOX	4. CITY OR T	OWN 5. ST.	6. ZIP CODE
F P. O. Box 1367	G Benton Harbor	MI 4	9022
IX. OWNER CERTIFICATION	45 15 16	40 41 47 47	
I certify under penalty of law that I have personally	examined and am familiar with the	e information submitted in this an	d all attached
documents, and that based on my inquiry of those in	ndividuals immediately responsible	for obtaining the information, I b	pelieve that the
submitted information is true, accurate, and comple including the possibility of fine and imprisonment.	te. I am aware that there are signifi	icant penaities for submitting faise	intermation,
A. NAME (print or type)	B. SIGNATURE	C. DATE SIGI	NED
	212/10	//- > -	
George Wyble	1 Hely Vi	4-27-	8 <u>/</u>
X, OPERATOR CERTIFICATION			
I certify under penalty of law that I have personally			
documents, and that based on my inquiry of those in submitted information is true, accurate, and comple			
including the possibility of fine and imprisonment.			u de la companya de La companya de la co
A. NAME (print or type)	B. SIGNATURE	C. DATE SIG	NED
Richard F Moore		More 4-5	<b>~</b> ^ .

EPA Form 3510-3 (6-80)

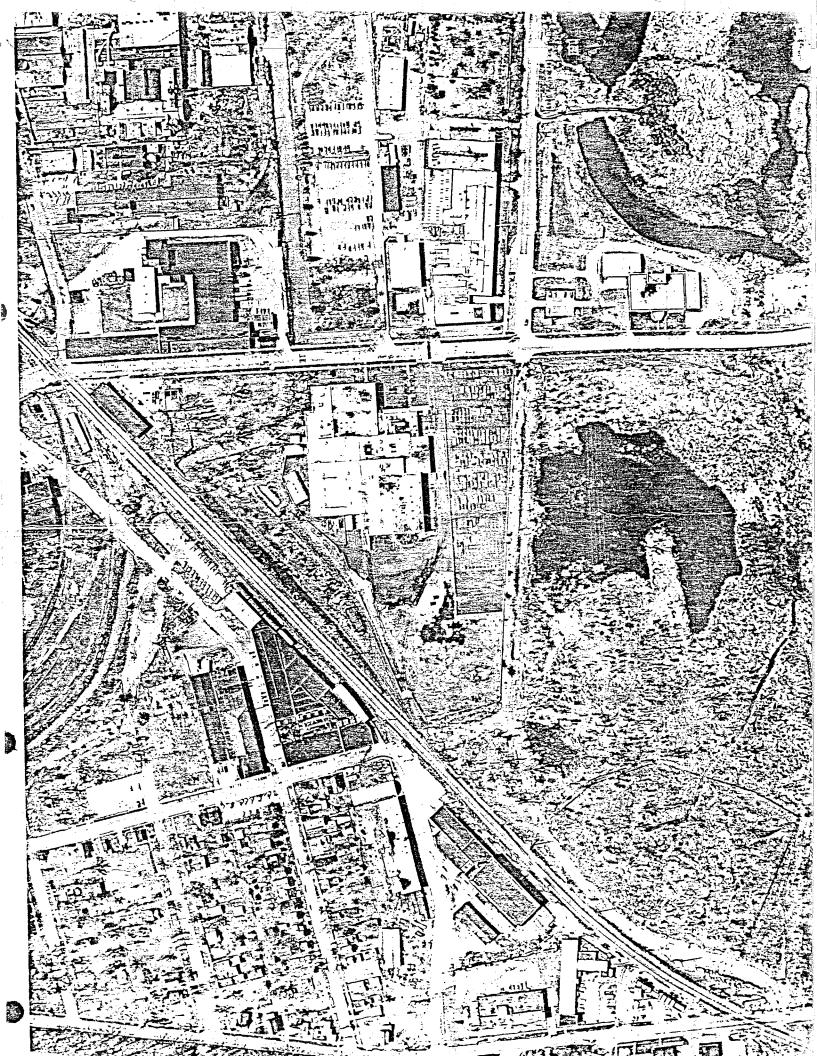
PAGE 4 OF 5

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MAP OF PART OF SEC. 24, T45, R 19W. CITY OF BENTON HARBOR, MICHIGAN

SCALE |" = 500"

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WIGHTMAN & ASSOCIATES, INC

920 BROAD STREET

ST. JOSEPH MICH

FOR MODERN PLASTICS

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- C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.
  - (1) 30 cu. yd. compactor container(1) 46 cu. yd. open top container

#### IV. DESCRIPTION OF HAZARDOUS WASTES

- A. EPA HAZARDOUS WASTE NUMBER Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE	METRIC UNIT OF MEASURE CODE
POUNDS	KILOGRAMSK
TONS	METRIC TONS

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

#### D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code/s/ from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER - Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- 1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- 3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

	A. EPA			D. PROCESSES									
Zo WASTE	HAZARD. WASTENO (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	OF MEA- SURE (enter code)	1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in $D(1)$ )								
X-1	K 0 5 4	900	P	T 0 3 D 8 0									
X-2	D 0 0 2	400	P	T 0 3 D 8 0									
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X-4	$D \begin{vmatrix} \dot{o} \\ 0 \end{vmatrix} 0   2  $				included with above								

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All existing facilities must include in the space provided on p	page 5 a scale dra	ving of the facility (see inst	ructions for more	aetail)	i de la company	n e n av neer akka anneer vermen ikk	ورواز كالكشارة الاوساسية بمامة فوالمعارضة والمنازعة الاوراد
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VII. FACILITY GEOGRAPHIC LOCATION		ages and an internal algebra before a selection of graduates deliberation and an internal sequence.	and the second s	بترافضه بعراءهم	Chiefful diametric chi	غرمس مصمت خطره	ويشكف واحديمين تدار ويشكونهم
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VIII. FACILITY OWNER		Bil Landski stalleberak kilolik bil gör elleri eller side	ىدەندىدىن تەرەققىنىڭ قىلانىدىن	فألأدينا العبادات		والمستوعدة والمارات	alah lalak dalam dal Angli dalam da
X A. If the facility owner is also the facility operator as li skip to Section IX below.	isted in Section V	'III on Form 1, "General In	formation", place	an "X	" in the bo	ox to the	left and
D. (Call., C. Viller, and J. Carlotte, Gallier, and Gallier,	and in Continu	III Four 1 - amenioto the	. following itoms				
B. If the facility owner is not the facility operator as Ii	sted in Section v	III on Form 1, complete the	- Tollowing itellis.				
1. NAME OF FACIL	ITY'S LEGAL O	WNER		2	PHONE	NO. (area	code & no.)
E Modern Plastics Corpostion				[6]	16-9	26	8201
15 16 3. STREET OR P.O. BOX	<u> </u>	4. CITY OR TOWN		5   56 5. ST.	- 5B     59	6. ZIP C	162 - 61 DDE
F P. O. Box 1367	G Be	nton Harbor		4 T	1.	000	2
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IX. OWNER CERTIFICATION	يت شيئيا في المنظمة ال	and the second state of the second state of the second second second second second second second second second	and the state of the	المحاوضات المجارف			عرونور دمو والتوبيد تنبعها
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submitted information is true, accurate, and complet	e. I am aware t	that there are significant	penalties for sui	bmitti	ing false	informat	tion,
including the possibility of fine and imprisonment.							
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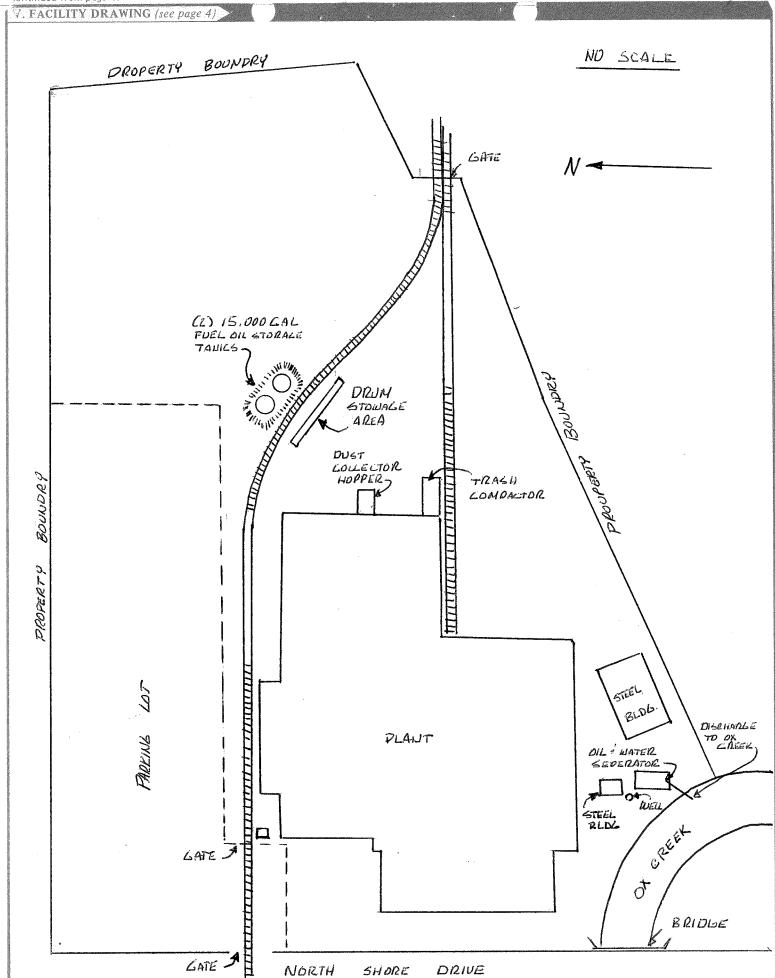
EPA Form 3510-3 (6-80)

Richard E. Moore

PAGE 4 OF 5

CONTINUE ON PAGE 5

7 <sup>1</sup> 2		



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### **OVER-SIZED DOCUMENT TARGET**

At this point in this file

a large document,

such as a map

or

engineering drawing occurred

This type of media is not compatible with this film format, which would require that the over-sized document be folded and filmed in multiple frames.

To enable the user to see this over-sized document as a single entity, it has been microfilmed on 35mm film.

7		

id Number _	LAT DOOR OCTARA THE WASTER	FIGSTICS CO	N DOK
Refer to	PHASE ONE	Indicate by	Valjd
Form No:	Interim Regulatory Requirements	your initials: Yes No	Prmlg Date?
1	T/S/D'Facility? (If No, return to respondent.)	K.D.	
3	Form 1 received?	RP _	
1	Form 3 received?	R.P.	
1 & 3	Postmarked on or before November 19, 1980?	RP	
3	Date of operation entered?	RP	
3	Date of operation on or before November 19, 1980?	22	
Notif.	Notifier?	3.P	
record	Notified on or before August 18, 1980?	B.P	
ı	Form 1, XIII B signed?	RP.	
3	Form 3, IX B Signed?	R.P	
	n items above are initialed in the Yes column, gene ement and indicate the trigger date here:	rate Interim Statu ) )	15
•	PHASE TWO	•	
1	Unsure if regulated or non-regulated?		
3	New facility?		
1 & 3	Core items missing? If Yes, indicate which items	:	
	Facility name; location; mail address; c	perator info;	•.
	certification; process info; waste info;	owner; sigs	•
	PHASE THREE		
1 & 3	Non-core items missing? If Yes, indicate which i	tems:	
•	<pre>Kaps; photos; drawings; lat/long</pre>	•	:
	Other observations and comments:		
		Received Date S	Stamp
Log out/Lo	g in		

(Stamp forms also)

on reverse side.

# Part A Review - Qualification for Interim Status

I.	General Information
	Facility Name Modern Planties Corp
	ID# MIDOO 506 9844
	Reviewer Brigalauski
	Review Completion due date [000 28 108]
	Date of submission of notification $8-15-80$
	deadline date 8-18-80
	Date of submission of Part A <u>5-4-81</u>
	deadline date
	Was the facility in exsistence before November 19, 1980
•	TT Core Items missing
	Non Core Item Missing
	-hance-les
II.	Facility Description
	A. Type of Facility:
	on-site .
	off-site
•	B. Classification
	Late Notification only
	Late Part A only
	Late Part A and Late Notification
	Non-Notifier
	Non-Notifier and Late Part A
	C. Action
	Qualifies for Interim Status
	Refer to Enforcement
	Non-regulated, explain NON-REGULATED
	NON-HAZ WASIZ

• 

## III. Facility History

A.*	The.	cir	cumstances surrounding the failure of the owner or operator to:
	1.	not	ify or notify on time
		a.	not aware that waste was hazardous
_	· · ·	b.	test results came back late
_	dermojnojnojnoj	С•	at first thought the waste was non-hazardous later results said it was hazardous
_		d.	could not understand regulations
		е.	lost in mail
_		f.	small quantity generator that lost his/her extemption due to increase in waste quantity
_		g.	did not think it was required if Part A sent in
		h.	underwent change in ownership.
		i.	change in regulations
_		j.	Other
_		. k•	Comments
			1
	2.	sub	omit Part A on time.
_		a•	could not understand regulations
			•

<sup>\*</sup> Complete this part by checking the written file information only-  $\underline{\rm NO}$  phone memos accepted.

• e# 

-	<del></del>	_ b.	expected to be able to store for less than 90 days but had problems disposing of wastes, and needed to store longer than 90 days
_		_ c.	underwent a change in ownership
_		_ d.	lost in the mail
		_ e.	contemplating closure of facility
-		- f.	had trouble filling out the form, or gathering the required information.
		_ g.	change in regulations
	X	_ h.	other Not Known
-			
		- <del></del>	
_		_ i.	Comments
			, W
			•
		-	
В.	1.	Has Fede	there been an inspection of the facility by either State or ral inspectors?
		date	Agency
	2.	If s (if	o, was the facility in compliance with 40 CFR Part 265 no answer below).
		_ a.	the violations were administrative in nature
		b.	the violations were environmental in nature

3.	a. List of violations:
<del>,</del>	
	b. Comments:
	. V
	· · · · · · · · · · · · · · · · · · ·
	(add additional pages if needed)
4.	Will the facility's continued operation be a benefit to the environ- ment?
	<ul> <li>a. it well help alleviate regional shortage of treatment, storage, or disposal capacity</li> </ul>
	_ b. damage to the environment is negligible or non-exsistent
	c. it will not benefit the environment

48. .

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	d.	other,	explain:	_Not_	K <sub>1</sub>	בולעס		
5.	Did	i the fa	cility gar	in unfair a	dvantage	over its	competito	rs by its non
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ewer <u>Gri</u>			
Review Star		2-22-8/ erim Regulatory Reguirements :	
	Α.	(1) FORM 1 MISSING .	· · · · · · · · · · · · · · · · · · ·
		(2) FORM 3 MISSING	i <u> </u>
	В.	POSTMARK after NOVEMBER 19, 1980	Valid
. •••	C.	(1) DATE of OPERATION MISSING	1 <u></u> 1
·		(2) DATE of OPERATION after NOVEMBER 19, 19	301-1-
	D.	(1) NOTIFIED after AUGUST 18, 1980	Valid
	.·	(2) NONNOTIFIER	1_1
•	E.	(1) FORM 1, XIII B SIGNATURE MISSING	· !!
•	: .	(2) FORM 3, IX B SIGNATURE MISSING	1
. 2.	Α.	TSDF	.   <b>∑</b>
•	в.	NONREGULATED	
	c.	UNSURE	· 1 <u>-</u> 1.
•	D.	UNKNOWN FACILITY (missing name and address on Form 3)	
	E.	NEW FACILITY	1_1
• •	F.	CORE ITEM(S) MISSING	圣
	G.	NONCORE ITEM(S) MISSING	1_1
	н.	OTHER	<u>i</u>

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SUBJECT			· · ·			
Facility I.D. # / Facility N	ane					
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EPA Form 1300-6 (7-72) REPLACES EPA HO FORM \$100-3 WHICH MAY BE USED UNTIL SUPPLY IS EXHAUSTE

ITEM NUMBER	CHECK IF ITEM MISSING
II. Pollutant Characteristics	<u> </u>
*III. Name of Facility	
	-
IV. Facility Contact	11
	•
V. Facility Mailing Address	
A. Street or P.O. Box	11
B. City or Town	11.
C. State	11
D. Zip Code	1_1
VI. Facility Location	***************************************
*A. Street, Route Number .	-1_1
B. County Name	1_1
*C. City or Town.	11 :
*D. State	i1
E. Zip Code	1_1
F. County Code (if known)	
VII. SIC Codes (other than Process and Hazardous Waste	
codes)	
VIII. Operator Information	•
*A. Name	
*B Is the name listed in VIII-A also the owner	''\ 
C. Status of operator	· ·
D. Phone	; <u> </u>
*E. Street or P.O. Box	1 1
*F. City or Town	··
*G. State	1 1
H. Zip Code	. است. - ا ا ر
MID 005069844	are

	FORM 1 (EPA FORM 3510-1)	CHECK IF IT
IX.	Indian Land	··
х.	Existing Environmental Permits	<u></u>
XI.	Map	11
XII.	Nature of Business	
XIII.	Certification  A. *1. Name  2. Official Title  *B. Signature  *C. Date Signed	fer IXI
	ç.	

Comments:

\*Form 1 is missing

## FORM 3 (EPA FORM 3510-3)

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	. •	::	•	•		· ·	MISSING
II.	First	: Applicat	ion			*	· · · · · · · · · · · · · · · · · · ·
7	*1.•	Existing	Facility D	Date (on or	r before	•	11
		November	19, 1980)			1	• .
• • • • • • • • • • • • • • • • • • • •	, .,	al area .	··· OR	•	•.		
• • •	*2.	'New Facil	ity Date (	(after Nove	ember 19,	1980).	: 1_1
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IĮI.	Proce	esses .	•	•		٠	
•	×Α.	Process C	ođe			•	1_1
••	*B.	Process D	esign Capa	acity-Amou	nt .		
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· IV.	Descr	ription of	Hazardous	s Wastes			***************************************
٠.	*A.	EPA Hazar	dous Waste	e Number		•	11
	*B.	Estimated	Annual Qu	uantity			1_1
, •	*C.	Unit of M	leasure	•			11
<b>.</b>	*D.	Processes		. •	, •	•	·
	•	*1. Prod	ess Codes	•			11
•	•	*2. Prod	ess Descr	iption (If	no code	is shown	)
		•	•	•	."		
V.	Faci	lity Drawi	ng ·	• • •	•		· 11
•							
vī.	Phot	ographs	-	•	•	•	. 11
		,			•	•	
VII.	Faci	lity Geogr	raphic Loc	ation Lati	tude	•	
s		Latitude					11
		Longitude	<u>.</u>	•	•		
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Reviewer's Initial

		•				•	MISSING
viii.	Faci	lty Owner	<b>6</b> * .	•	•		•
	*1.	Name of Facil	lity's Lega	l Owner	•		1 1
	2.	Phone	• •				1 1
	*3.	Street or P.	O. Box	•	•		1 1
	*4	City or Town	, ·	•			:
•		State	· · · · · · · · · · · · · · · · · · ·				
		Zip Code.				* * *** · ·	··
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IX.	Owne	r Certification	on				
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	*B.	Signature	•	· · · .		•,	7
		Date Signed				•	
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· x.	Oper	ator Certific	ation				
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•	*B.	Signature	•	63	•		
•	*C.	Date			5.77	•	
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CHECK IF ITEL



# UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION V

111 West Jackson Blvd. CHICAGO, ILLINOIS 60604

REPLY TO ATTENTION OF: RCRA Activities

FEB 26 1982

Richard E. Moore, Plant Engineer Modern Plastics Corporation P.O. Box 1367 Benton Harbor, MI 49022

RE: Hazardous Waste Permit Application-Incomplete Part A Facility Name (and EPA ID number) (MID005069844) Facility Address

We have completed our review of your Part A RCRA permit application for the facility referenced above. The application was incomplete; therefore, we are returning it to you along with a checklist which indicates the missing items marked with an "X". Please return the form in time to reach this office by March 26, 1982 . The form must be signed by the appropriate certifying official (Item XIII on Form 1 or Item IX and X on Form 3) or his duly authorized representative. All of these items are necessary in order for the U.S. Environmental Protection Agency to determine whether your facility meets the requirements for interim status.

Please feel free to contact David Homer, the reviewer of your application, at (312) 353-2197 or me at (312) 886-7449 if you have any questions or wish to discuss the missing items on the checklist.

Sincerely yours,

Arthur S. Wawatachi

Regional Project Officer

Enclosure

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	PHONE CALL DISCUSSION	FIELD TRIP	CONFERENCE
RECORD OF COMMUNICATION	OTHER (SPECIFY)		<del></del>
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TO:	FROM:	DATE	3/0-/
~ n11		TIME	3/25/82
David Home	Richard Moore	, ,	7:45
SUBJECT			
Medern Plastics Corp			
SUMMARY OF COMMUNICATION		A CONTRACTOR OF THE CONTRACTOR	
Tod is an SOL			
4.76 cm uds	= 15,352 gal		
0, -			
	+ 300 gal		
	+ 300 gal		
	15,652 gel		
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INFORMATION COPIES TO:			

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BENTON LARBOR MICHIGAN 490

March 25, 1982

Mr. David Homer
U. S. Environmental Protection Agency
Region V
111 West Jackson Blvd.
Chicago, IL 60604

Dear Mr. Homer:

NH 926-82

WASTE MANAGEMENT BRANCH
REGION V

#### RCRA Activities

This is in reference to the Environmental Protection Agency's letter dated February 26, 1982, as it concerns Mr. Richard Moore's signature as authority for the application.

Mr. Moore is our Plant Engineer and most knowledgeable of this project and the requirements, and I authorized him to sign in behalf of the Company. Rather than submit new forms bearing my own signature as President of the Company, I request that this letter serve the same purpose. Should this not be acceptable, we request that you forward us new forms for resubmittal.

Sincerely yours,

MODERN PLASTICS CORPORATION

ton a Mille

Victor A. Miller

President

pg Enc.

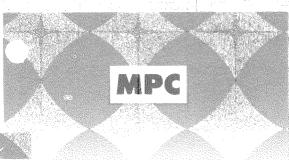




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P. O. BOX 1367, NORTH SHORE DRIVE . BENTON HARBOR, MICHIGAN 49022

March 25, 1982

Mr. David Homer
U. S. Environmental Protection Agency
Region V
111 West Jackson Blvd.
Chicago, IL 60604

Dear Mr. Homer:

#### RCRA Activities

This is in reference to the Environmental Protection Agency's letter dated February 26, 1982, as it concerns Mr. George Wyble's signature as authority for the application.

Mr. Wyble is our Treasurer and General Manager and is most knowledgeable of this project and the requirements, and I authorized him to sign in behalf of the Company. Rather than submit new forms bearing my own signature as President of the Company, I request that this letter serve the same purpose. Should this not be acceptable, we request that you forward us new forms for resubmittal.

Sincerely yours,

MODERN PLASTICS CORPORATION

ito a mile

Victor A. Miller

President

pg Enc.





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16 - 19		7 15 16 - 19			
I. OPERATOR INFORMATION					
	A. NAME				B. Is the name listed in tem VIII-A also the
MODERN DIACTE		וא סדיים א פ	, , , , , ,		owner?
MODERN PLASTI	C, $S$ , $C$ , $O$ , $R$ , $P$ , $O$	KAILUN			∐ A YES □ NO
C. STATUS OF OPERATOR (Enter the	appropriate letter into the	answer box: if "Other"	specify		'area code & no.)
F = FEDERAL M = PUBLIC (other i S = STATE O = OTHER (specify	than federal or state)	(specify)		Å 6 1 6 9	26 8201
P = PRIVATE	56	Owner op	erateu	15 16 - 18 19	- 21 22 - 25
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O, BOX, 1,3,6,7					
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EXISTING ENVIRONMENTAL PERMITS					
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C. RCRA (Hazardous Wastes)	30   15   16   17   18   E. C	THER (specify)	30 FOI	pla:	
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Continued from page 2. NOTE: Photocopy this page before completing if you more than 26 wastes to list.

Form Approved OMB No. 158-S80004

FOR OFFICIAL USE ONLY EPA I.D. NUMBER (enter from page 1) WM10005069844 W DUP DUP IV. DESCRIPTION OF HAZARDOUS WASTES (continued) C.UNIT OF MEA-SURE (enter code) D. PROCESSES A. EPA HAZARD. WASTE NO B. ESTIMATED ANNUAL QUANTITY OF WASTE N S 1. PROCESS CODES (enter) 2. PROCESS DESCRIPTION (if a code is not entered in D(1)) (enter code) 36 27 - 29 27 - 29 27 - 29 27 - 29 James F 0 0 1 400 P <u>S,0,1</u> 2 1|3 U 0 100 P T 0 3  $U \mid 0 \mid$ 6 9 20 T 0 4 U 1 2 2 50 P T 0 5 U 1 8 8 30 P T 0 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26

EPA Form 3510-3 (6-80)

A. NAME (print or type)

Richard E. Moore

including the possibility of fine and imprisonment.

PAGE 4 OF 5

More

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information,

B. SIGNATURE

CONTINUE ON PAGE 5

C. DATE SIGNED

AREA CODE 616 PHONE 926-8201





P. O. BOX 687, NORTH SHORE DRIVE . BENTON HARBOR, MICHIGAN 49022

July 15, 1982

Regional Administration U.S. EPA Region V RCRA Activities P.O. Box 3587 Chicago, IL 60690

7/19/82

RECEIVED

JUL 1 9 1982

WASTE MANAGEMENT BRANCH EPA. REGION V

Gentlemen:

We are writing in regards to our application for RCRA permit as a storer and generator of hazardous waste. Since our filing, an inspection of our facility has been conducted by the Michigan DNR, and it has been concluded that we are infact neither a storer or generator.

We are enclosing copies of the Inspection report by the DNR, and a copy of a laboratory analysis of the materials in question. We request that our application be returned or cancelled, whichever is most appropriate as both the inspection and test report conclude it was not necessary for us to file. If any questions should arise concerning this matter, please feel free to contact us at (616) 926-8201.

Sincerely yours,

MODERN PLASTICS CORPORATION

George F. Wyble General Manager

Richard Moore Plant Engineer

Enclosure: GW/RM:dm

MID-005-069-844

IGNING \* ENGINEERING \* TOOLING \* COMPRESSION MOLDING \* INJECTION MOLDING \* BLOW MOLDING \* FINISHING AND ASSEMBL

STATE IDENTIFICATION NUMBER (If Applicable)



### RCRA INSPECTION REPORT - INTERIM STATUS STANDARDS TREATMENT, STORAGE, AND DISPOSAL FACILITIES Form A - General Facility Standards

#### I. General Information:

(A) Facility Name: Modern Plastics Corport (b) Street: 489 North Shore Drive (c) City: Benton Hambor (D) State: Mich (F) Phone: 6/6 926-8201 (G) County:	
(c) City: Benton Hambon (D) State: Mich	(E) Zip Code: 49022
(1) 001 00 1	$\cup O$
(F) Phone: (6/6) 4/26-8/201 (G) County:	BERRIEN
(H) Uperator: SAME	to the state of th
(I) Street:	
(J) City: (K) State:	(L) Zip Code
(Pr) Phone: (N) County:	
(U) Owner: <b>SAME</b>	
(P) Street:	
(Q) City:(R) State:	(S) Zip Code:
(I) Phone: (U) County:	
(V) Date of Inspection: $4/1/82$ (W) Time of Inspection	pection (From) <u>10:00AM</u> (To) <u>/Z:00N</u>
(X) Weather Conditions: Survey, Cold (10°F)  Slight before from south. 4-6".	
Slight beeze from south. 4-6"	SNOW COVOR.

.

	Pichmed E. Moore	Plant Engineer	Telephone (6/6)926-820
	nspection Participants  JAMES M. Tuesk	Ayency/Title Wahn Quali MDNR/Spainlist	Telephone (616) 456-6232
— Р	Preparer Information		
V	Чаше	Agency/Title	Telephone
	1	I. SITE ACTIVITY:	**
t	Lomplete sections I through VII facilities. Complete the forms to the site activities identified North Applicask - Security Storage and/or Treatment I. Containers (I) 2. Tanks (J) 3. Surface Impoundments (K) 4. waste Piles (L)	or all treatment, storage, a (in parenthesis) in section we below:  **Remnants Section.**  **D.** Incineration and (0 and P)	/III corresponding d/or Thermal Treatment

 $\frac{\text{Note:}}{\text{IX and X of this form as appropriate.}}$  If facility is also a generator or transporter of hazardous waste complete sections



Use this section to briefly describe site activities observed at the time of the inspection. Note any possible violations of Interim Status Standards.

This fracility's hazardous waste permit application listed storage and other transformet" of spoot halogenated solvents, asbestos, 1,2 benzewedicaeboxylic acid dibutylether, formaldebyde, and hydroxybenzewe. Staffs inspection found that this company does not store on transformed any of the hazardous wastes listed in their application. The company does governate the following waste materials and disposes of them in the following manner:

. Waster molded plastic pants and collected in a hash compactor for disposal

At the Northwest Bornin County Landfill.

Dust from A parts cleaning operation (similar to sand blashing) is collected in A dumpstore for disposal in the Northwood Borning County Landfill. This dust is A mixture of pulmited conn cobbs and plastic granules.

Wasts hydraulic oil is REPROCESSED ON-site through A portable

tiltnation unit for Rease in the molding machines.

The company also uses small guartities of trichlomosthylows (Panoly), mothyl ethyl Ketone, Acetone, and Stoddard solvent for cluming plastic parts. These solvents are consumed during use and there is No solvent waste or studge governated.

Some of the plastic Resins used contain zine, lead and chromium and could possibly be E.P. Toxic. The plastic and dust waste should be tosted for E.P. Toxicity (See deficioncy to the fo company).

#### NATURAL RESOURCES COMMISSION

JACOB Á. HOEFER
CARL T. JOHNSON
E.M. LAITALA
HILARY F. SNELL
HARRY H. WHITELEY
JOAN L. WOLFE
CHARLES G. YOUNGLOVE



WILLIAM G. MILLIKEN, Governor

#### DEPARTMENT OF NATURAL RESOURCES

HOWARD A. TANNER, Director

350 Ottawa Avenue, N. W. Grand Rapids, Michigan 49503 Phone: (616) 456-6232

May 20, 1982



Modern Plastics Corporation 489 North Shore Drive Benton Harbor, MI 49022

ATTENTION: Richard Moore, Plant Engineer

Gentlemen:

On April 7, 1982, staff of the Department of Natural Resources conducted an investigation of your facility located at 489 North Shore Drive in Benton Harbor, Michigan to evaluate compliance of that facility with requirements of subtitle C of the Resource Conservation and Recovery Act (RCRA), as amended. The completed RCRA inspection form is enclosed.

As a result of that investigation, staff of the Department of Natural Resources have determined that the facility is in violation of the requirements of subtitle C of RCRA. Specifically, staff found that:

1. 40 CFR 262.11 requires that a person who generates a solid waste must determine if that waste is a hazardous waste. Modern Plastics Corporation has not made this determination for the plastic waste and plastic dust residue.

We request that you respond to this letter by June 15, 1982, providing documentation to this office regarding those actions taken to correct these violations.

If you have any questions regarding this matter, please feel free to contact me at (616) 456-6232.

Sincerely, WATER QUALITY DIVISION

James M Turker

James M. Turek Water Quality Specialist

JMT:bjc enc.

Al Howard, OHWM (w/enc.) EPA Region V (w/enc.) John Bohunsky, WQD

R1026-1 1/79

MICHIGAN

PHONE, 926-6-201



NORTH SHORE DRIVE - BENTON HARBOR, MICHIGAN 49027

June 14, 1982

Mr. James M. Turek Water Quality Specialist Department of Natural Resources 350 Ottawa Avenue N.W. Grand Rapids, MI 49503

Dear Jim:

Per our phone conversation, in requard to your request that we respond by June 15, 1982 to provide documentation that corrective action be taken regarding our being in violation of subtitle C of RCRA.

We have collected samples of the plastic dust residue in question, and it is currently being tested for E.P. toxicity by Ten-Ech Laboratories in South Bend, IN . As I stated on the phone, the test will not be completed for at least another week due to the labs current work load. However, as soon as it is ready, I will forward you a copy.

Currently we see no problems, and feel that the end results will indicate we are not a generator of hazardous waste.

If you have any questions regarding this matter, please feel free to contact me at (616) 926-8201 ext. 214.

Sincerely,

Richard Moore

Plant Engineer

RM:dm



Chicago, 11. Louisville, Ky

LABORATORY **ANALYSES RESULTS** 

	PAGE1 OF1 DATE6/25/82
SAMPLE DESCRIPTION	DATE COLLECTED
Dust from Finishing Sample	COLLECTED BY
EP Toxicity	LAB CONTROL NO. 6379
Mr. Dick Moore, Plant Engineen	
FROM Modern Plastics Corp. P. O. Box 1367	DRINKING WATERYESX NO IF YES, SAMPLE TYPE
Benton Harbor, MI 49022	IF IES, SAWIFLE LIFE

PARAMETER	RESULTS	ATE ANALYZE	D ANALYST ME	THOD OF ANALYSIS
<u>Sample 6379</u>				
Chromium	20 ppb	6/24/82	JTC	AA
Lead	6 ppb	6/24/82	JTC	AA
Zinc	10 ppm	6/24/82	JTC'	AA
Blank				
		6 / 2 / 10 2	170	ΛΛ.
Chromium	<1 ppb	6/24/82	JTC	AA
Lead	1 ppb	6/24/82	JTC	AA
Zinc	<0.05 ppm	6/24/82	JTC	AA
			내용하게 됐는 그 뭐 뭐 하는 것이다.	·호마, 그리트 중인 시간 : 100

#### REMARKS

The maximum allowable concentrations for these parameters under the Michigan Hazardous Wastes Regulations are:

Chromium - 5 ppm Lead -5 ppm

500 ppm Zinc -

It is evident that this sample is well within compliance for the requested parameters.

ANALYSES REVIEWED BY Horry a Hilot

# STATES TO AN ANOTECHO

## UNITED STATES AVIRONMENTAL PROTECTION AGENCY REGION V

111 West Jackson Blvd. CHICAGO, ILLINOIS 60604

REPLY TO ATTENTION OF:

RCRA ACTIVITIES

0 8 OCT 1982

Richard Moore, Plant Engineer Modern Plastics Corporation P.O. Box 687 - North Shore Drive Benton Harbor, Michigan 49022

RE: Withdrawal of Part A (Non-Hazardous Waste)

FACILITY NAME: Modern Plastics Corporation

USEPA ID No.: MID 005 069 844

Dear Mr. Moore:

This to acknowledge that the United States Environmental Protection Agency (USEPA) has completed it review of your Part A Hazardous Waste Permit Application and your letter of <u>July 15, 1982</u>, requesting the withdrawal of your permit application. According to the information which you have submitted, the wastes which are treated, stored or disposed at your facility are not defined as a hazardous waste in 40 CFR 261.3. It is the opinion of this office, based on the information submitted that your facility is not required to have a hazardous waste permit under Section 3005 of the Resource Conservation and Recovery Act at this time. Please be advised that you must still comply with any applicable State and local requirements.

You will retain your USEPA Identification number if you notified that the facility is a generator or transporter of a hazardous waste.

Please contact the Technical, Permits and Compliance Section at (312) 353-2197 for assistance if you have any questions. Please refer to "Withdrawal of Part A (Non-Hazardous Waste)," in all telephone contacts and correspondence.

Sincerely yours,

Karl J. Klepitsch, Jr., Chief

Waste Management Branch

cc: George F. Wyble, General Manager

MDNR

		N.		
			No. 4 Control	

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Unit Chiefs		:	• •	aun	: 20. 94
Attached for	r your review i	s a copy of	F_Letta	i notify	ing.
of ne	ew autho	ri ed	signat	or.	J
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October 12, 1983

Mr. David Homer U. S. Environmental Protection Agency Region V 111 West Jackson Blvd. Chicago, IL 60604

MID 005 069 844 6 PA

Dear Mr. Homer:

#### RCRA Activities

This is to inform you that Mr. Richard Moore is no longer our Plant Engineer.

Replacing Mr. Moore is Mr. John Baltmanis, who is authorized by me to sign on behalf of Modern Plastics Corporation in the same capacity as Mr. Moore.

If there are any questions, please feel free to contact me.

Sincerely yours,

MODERN PLASTICS CORPORATION

Victor A. Miller

President

pg

Part (18 or off )

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